

CALIFORNIA HAZARDOUS WASTE MANIFEST

State Department of Health Services
HAZARDOUS MATERIALS MANAGEMENT SECTION
744 P Street, Sacramento, CA 95814

1 Manifest Number 227 - 025588

See reverse side for instructions.
Please type or print clearly. Press Hard.

GENERATOR (Generator Must Complete)

(2) Name	Dollars Hazardous Waste		
EPA NO.	01100000000000000000		
Address	1907 Alba Street		
City, State, Zip	Sacramento, CA 95814		
(5) U.S. DOT PROPER SHIPPING NAME	WASTE		
WASTE	Hazardous Waste		
WASTE	Waste		
(6) WASTE CATEGORY	2		
LIST COMPONENTS:			
(9) A.	100% ppm		
B.	100% ppm		
C.	100% ppm		
D.	100% ppm		
(10) WASTE PROPERTIES: pH	1.5		
(11) PHYSICAL STATE:	Solid		
(12) SPECIAL HANDLING INSTRUCTIONS:	Gloves Goggles Respirator		

(7) EX. HAZ. WASTE PERMIT NO.	32045		
CONC. RANGE	LOWER	UPPER	UNITS
A.	0%	100%	ppm
B.	0%	100%	ppm
C.	0%	100%	ppm
D.	0%	100%	ppm
(8) GENERATING PROCESS	Acidic		
CONTAINERS NUMBER:			
TYPE:	<input checked="" type="checkbox"/> DRUMS	<input type="checkbox"/> BAGS	<input type="checkbox"/> CARTONS
	<input type="checkbox"/> TANK TRUCK	<input type="checkbox"/> DUMP TRUCK	
OTHER			

GENERATOR CERTIFICATION: This is to certify that the above named materials are properly classified, described, packaged, marked, labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and EPA.

IN THE EVENT OF A SPILL, CONTACT THE NATIONAL RESPONSE CENTER, U.S. COAST GUARD 1-800-424-8802

(TRANSPORTER) (HAULER MUST COMPLETE)	OIL PROCESS CO.	TRUCK NO.	TLR. NO.	PICK-UP DATE
(14) NAME	22134			10-5-82
EPA NO.	CADO 50806850			TIME
ADDRESS	5756 Alba Street			AM PM
CITY, STATE, ZIP	Los Angeles, California 90058			(16)

(TSD FACILITY) (FACILITY OPERATOR MUST COMPLETE)	18 QUANTITY (If Measured)	19 STATE FEE (If Any)	(21) HANDLING OR DISPOSAL METHOD:		
(17) NAME					
EPA NO.				<input type="checkbox"/> Surface Impoundment	<input type="checkbox"/> Landfill
PHONE NO.				<input type="checkbox"/> Injection Well	<input type="checkbox"/> Land Treatment
(20) INDICATE ANY SIGNIFICANT DISCREPANCIES BETWEEN MANIFEST AND SHIPMENT:				<input type="checkbox"/> Treatment (Specify)	<input type="checkbox"/> Storage/Transfer
IF WASTE IS HELD FOR DELIVERY ELSEWHERE, SPECIFY THE DESIGNATED TSD FACILITY:				<input type="checkbox"/> Recovery or Reuse	<input type="checkbox"/> Storage Transfer
(22) NAME				Date Accepted	
EPA NO.				GENERATOR	
(23) Signature of Authorized Agent and Title				Date Accepted	

INSTRUCTIONS

COMPLETING MANIFEST FORMS

Type or print clearly. Illegible or incomplete manifests will be returned to you by the State.

GENERATOR:

- ITEM **①** Before filling out the manifest, a unique manifest serial number shall be written or printed on the manifest. (Refer to TRANSPORTER item No. 1 below)
- ITEM **②** Provide the complete names, EPA I.D. numbers, addresses and telephone numbers of the generator and designated TSD Facilities.
- ITEM **⑤** Provide all U.S. DOT required information. Refer to 49 CFR 172 for assistance. If not applicable write "none" in item 5.

- ITEM **⑥** Provide the most applicable industrial waste category number from the following list. In cases where a waste could be described by more than one category, select the most specific. Example: If you generate a waste acid plating solution containing dissolved metal, select the category "Plating solution, acid" rather than "Heavy metal solution". If none of the listed categories adequately describe your waste, write the waste's category in item 6.)

1. Acid sludge
2. Acid solution
3. Adhesive
4. Alkaline sludge
5. Alkaline solution
6. Alkali solids
7. Alum sludge
8. API separator sludge
9. Asbestos solids
10. Asbestos sludge
11. Ashes
12. ASD filter cake
13. Baghouse waste
14. Bleach water
15. Blasting sand
16. Capacitors, PCB
17. Catalyst
18. Chemicals, unused
19. Containers, empty
20. Contaminated equipment
21. Contaminated soil
22. Cyanides
23. Detergent
24. Distillation bottoms
25. Drilling mud
26. Drugs
27. FCC waste
28. Filter cake
29. Filters, spent
30. Flux
31. Fly ash
32. Gasoline and water
33. Glue
34. Glue sludge
35. Hair pulp
36. Heavy metal solution
37. Heavy metal sludge
38. Ink and solvent
39. Ink sludge
40. Ink waste, water
41. Laboratory chemicals
42. Lime sludge
43. Machine tool coolant
44. Machining waste
45. Metal dust
46. Oil
47. Oil sludge
48. Oil and water
49. Paint sludge
50. Pesticides
51. Pesticide containers
52. Pesticide rinse water
53. Phenolic waste
54. Photoprocessing waste
55. Plating sludge
56. Plating solution, acidic
57. Plating solution, alkaline
58. Polychlorinated biphenyls
59. Resin waste
60. Scrubber sludge
61. Scrubber solution
62. Soap
63. Solvent, chlorinated
64. Solvent, hydrocarbon
65. Solvent, oxygenated
66. Solvent, mixed
67. Spill cleanup residue
68. Streiford solution
69. Sunfire sludge
70. Sump or lagoon sediment
71. Tank bottom sediment
72. Tanning sludge
73. Tetraethyl lead sludge
74. Transformers, PCB (GASED, TEL)

If waste not listed above, specify in Item 6 on manifest.

ITEM **⑦** If the waste is extremely hazardous, provide the State extremely hazardous permit-number.

ITEM **⑧** Indicate the process, activity, or operation which generated the waste (Examples: aircraft cleaning, insulation, stripping, reactor cleaning, DDT production, alkylation, printed circuit board etching).

ITEM **⑨** INFORMATION MUST BE PROVIDED IN THIS ITEM 9, DO NOT LEAVE BLANK. Identify the major hazardous constituents in the waste along with probable upper and lower concentrations. (Examples: hydrochloric acid, lead oxide, phenol, PCB, cyanide, DDT, sodium hydroxide). Provide the approximate concentration of nonhazardous materials.

ITEMS **⑩** Check the appropriate boxes to show the hazardous properties and physical state of the waste. If a waste has more than one hazardous property (e.g., toxic and corrosive), check all appropriate properties (e.g., toxic and corrosive boxes). If the waste is an aqueous liquid, the pH must be reported in item 11.

ITEM **⑪** Indicate by checking the appropriate boxes whether gloves, goggles, or respirators should be worn by persons handling the waste. Any special equipment, precautions or hazards should also be noted (Example: Suffocating solution will generate toxic gas if mixed with acids).

ITEM **⑫** Sign the manifest and provide your title and the date that the waste was removed from your facility. The person signing item 13 shall be knowledgeable about the chemical and physical properties of their waste and shall be authorized by the management of the generating establishment to sign the manifest. IT IS UNLAWFUL FOR A TRANSPORTER WHO IS NOT THE GENERATOR TO SIGN ITEM 13.

TRANSPORTER:

ITEM **⑬** Provide the serial number of the manifest. The first three digits shall be your State hazardous waste hauler number. The six last digits may be any convenient combination of digits (e.g., for any five year period (Example: if your registration number is 899, the number of your one thousandth load would be 899-00000). The complete nine digit manifest number shall be unique.

ITEM **⑭** Enter company name, EPA I.D. number, address and telephone number.

ITEM **⑮** Indicate the date and exact time the waste was removed from the generator's facility.

ITEM **⑯** Sign the manifest upon receipt of the shipment and indicate the date signed. The driver shall carry this manifest in a location prescribed in 49 CFR 173.105.

TSD FACILITY OPERATOR:

ITEM **⑰** Provide the TSD facility name and EPA I.D. number.

ITEM **⑱** If the quantity of waste is measured or estimated at the TSD facility (e.g., weighed), indicate the quantity.

ITEM **⑲** If the waste is applied to the land (e.g., surface impoundment, landfill, injection well, or land treatment area), the State hazardous waste fee must be sent to DOHS. Indicate the fee in item 19.

ITEM **⑳** Write in any discrepancies noted between the manifest information provided by the generator or transporter and that found when the shipment was delivered to the facility. (Examples: differences in quantity or character of waste, container type, or vehicle type). Some significant discrepancies are described in 40 CFR 264.72.

ITEM **㉑** Check the box(es) to indicate the method(s) used to handle or dispose of the waste at the hazardous waste facility. (Examples: neutralization, incineration, oxidation).

ITEM **㉒** If the waste is held at the TSD facility prior to eventual shipment to another facility or treatment, storage, or disposal, provide the name of the designated final TSD facility and its EPA I.D. number. In such cases, you as the facility operator (transfer station), shall fill out a new master manifest indicating your facility as the generator of the waste and describing all the wastes in the shipment. Completed copies of all original manifests associated with the original waste shipments accepted by you shall be attached to the master manifests.

ITEM **㉓** Sign the manifest, provide your title within the organization and indicate the date that the shipment was accepted at your facility. The facility operator shall send a copy of the completed manifest to the DOHS, on a monthly basis, or as otherwise required. Wastes are received from transfer facilities; the final TSD facility shall send copy number 1 of each master manifest to DOHS with copies of all original manifests STAPLED to it.

Transfer facilities shall send only one set of copies to DOHS to satisfy the manifest submission requirements for generators and TSD facility operators.

DISTRIBUTION OF MANIFEST COPIES: Copy No. 1 (Original): TSD keeps - (send photocopy to DOHS); Copy No. 2: To Transporter after signed by TSDF; Copy No. 3: To Generator from TSDF; Copy No. 4: Generator keeps after signed by Transporter (send photocopy to DOHS).

TONS/LEGGIBLE COPIES USE ONLY BLACK CARBON INSERTS OR BLACK PRINT CARBONLESS TRANSFER PAPER.